303 - Department of Health

A001 Department of Health Administration

Department of Health administration manages the day-to-day operations and leadership functions of the agency. Staff in this area provides executive leadership, policy development and review, financial services, computer and information technology services, personnel services, communications, and safety and emergency management support for the agency's programs.

	FY 2010	FY 2011	Biennial Total
FTE's	202.5	196.2	199.4
GFS	\$6,627,000	\$6,819,000	\$13,446,000
Other	\$17,627,000	\$17,127,000	\$34,754,000
Total	\$24,254,000	\$23,946,000	\$48,200,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Increase healthy behaviors

Expected Results

Leadership and organizational support ensure a reliable and responsive public health network.

A002 Chronic Disease Prevention

Prevention is the cornerstone of public health. The Department of Health works through many channels to proviide public health promotion resources, materials, and evidence-based strategies to educate and inform the public on how to be healthy and prevent disease. The Department provides technical assistance in community planning with the goal of making the healthy choice the easy choice. Activities include tobacco prevention and control; promotion of regulat physical activity and proper nutrition; chronic disease prevention and disease management strategies; cancer prevention and control; and cardiovascular disease prevention and control.

	FY 2010	FY 2011	Biennial Total
FTE's	93.0	91.0	92.0
GFS	\$3,913,000	\$3,896,000	\$7,809,000
Other	\$28,639,000	\$29,671,000	\$58,310,000
Total	\$32,552,000	\$33,567,000	\$66,119,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Increase healthy behaviors

Expected Results

People have the information they need to prevent disease and injury, manage chronic conditions, and make healthy decisions.

Percent of 10th graders who report smoking in the last 30 days.					
Biennium	Period	Target	Actual	Variance	
2009-11	7th Qtr	10%			
2007-09	7th Qtr	11%			

7G02

Despite a recent upturn in smoking rates among 10th graders, overall progress among the entire youth population has been maintained. Target 10% or less by 2010 (Healthy People). Data source: Healthy Youth Survey - Healthy Youth Survey, a biennial paper and pencil survey administered in even years statewide in Washington classrooms. Data from this survey are released only once per biennium - typically in Quarter 7. Measure began in 07-09.

Percent of current adult cigarette smokers.				
Biennium	Period	Target	Actual	Variance
2009-11	6th Qtr	17%		
İ	2nd Qtr	17.6%		
2007-09	6th Qtr	18.1%		
	2nd Qtr	18.7%	17%	(1.7)%
2005-07	6th Qtr	19.2%	17.6%	(1.6)%
İ	2nd Qtr	19.8%	19.5%	(0.3)%

7B02

Tobacco use is the leading cause of preventable death in Washington State and across the country. Smoking is also a risk factor for heart disease, stroke, lung cancer and chronic lung disease - 8,000 people die from smoking-related causes in Washington each year. Data Sources: Behavioral Risk Factor Surveillance System. Data is reported when received from CDC and represents performance in previous year. Reporting Frequency: Annual in Q2 and Q6. Measure began in 05-07.

Slow the obesity annual growth rate.				
Biennium	Period	Target	Actual	Variance
2009-11	6th Qtr	4.29%	•	
	2nd Qtr	4.31%		
2007-09	6th Qtr	4.39%	4.41%	0.02%
	2nd Qtr	4.39%	4.4%	0.01%

7.J02

Obesity in Washington has doubled in the last two decades. As the rate of obesity increases, so do the rates of chronic disease -- diabetes, heart disease, stroke, hypertension, some types of cancers and related health care cost. Data Source: Behavior Risk Factor Surveillance Survey. Report Frequency: Annually in Q2 and Q6. Measure began in 07-09.

A003 Drinking Water Protection

The Drinking Water program works with the State Board of Health, local water systems, and communities to make sure that drinking water is safe and reliable. Activities include monitoring water quality tests; conducting inspections of water systems; enforcing regulations and safety measures; assisting water systems during planning, design, and construction of new facilities and upgrades; training and certifying water system operators; ensuring proper wastewater treatment; and providing funding for water system improvements.

	FY 2010	FY 2011	Biennial Total
FTE's	146.6	146.5	146.6
GFS	\$3,056,000	\$3,052,000	\$6,108,000
Other	\$18,445,000	\$14,436,000	\$32,881,000
Total	\$21,501,000	\$17,488,000	\$38,989,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Mitigate environmental hazards

Expected Results

in 05-07.

People using public water systems have safe and reliable drinking water.

Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	88%	1	
	4th Qtr	85%		
2007-09	8th Qtr	81%		
	4th Qtr	85%	77%	(8)%
2005-07	8th Qtr	90%	83%	(7)%
	4th Qtr	90%	87%	(3)%

Data Base. Report Frequency: Annually Q4 and Q8. Measure began

A004 Public Health Emergency Preparedness and Response

Public health agencies play a key role in making sure our communities are prepared for emergencies. The Department of Health works with local health departments, hospitals, emergency managers, and others to help prepare our state for everything from natural disasters to bioterrorism threats. As part of this work, the Department coordinates the development of state, regional, and local public health emergency response plans. The agency also works with emergency responders and others to provide training and exercises on topics such as mass vaccination and risk communication. Through a variety of activities including facilitating local, regional, state, and tribal partnerships, public education campaigns and activities, and building systems to quickly share health information, the Department is improving preparedness in Washington state.

	FY 2010	FY 2011	Biennial Total
FTE's	55.1	55.0	55.1
GFS	\$22,000	\$21,000	\$43,000
Other	\$21,675,000	\$10,510,000	\$32,185,000
Total	\$21,697,000	\$10,531,000	\$32,228,000

Statewide Result Area: Improve the health of Washingtonians Statewide Strategy: Identify and mitigate health risk factors

Expected Results

Public agencies are better equipped to help people through a public health emergency.

Increase the percentage of major trauma patients who survive.				
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	88.5		
	4th Qtr	88		•
2007-09	8th Qtr	87.5		
•	4th Qtr	87	87.5	0.5
2005-07	7th Qtr	84	86	2
	3rd Qtr	83.5	83.4	(0.1)

6A04

Trauma is defined as a major single or multi-system injury that requires immediate medical or surgical intervention or treatment to prevent death or permanent disability. Trend data show a continuous improvement in the system that results in an improved survival rate for major trauma patients in Washington. Causes of trauma include motor vehicle crashes, falls, intentional violence. Data Source: Washington State Trauma Registry. Report Frequency: Annually Q4 and Q8. Began in 05-07.

I	Number of successfully completed Proficiency Testing programs
I	for agents of biological threat.

		agenta of biolo	3.0000. _	
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	1	-	
	7th Qtr	1		
ĺ	6th Qtr	1		
ĺ	5th Qtr	1		
ĺ	4th Qtr	1		
	3rd Qtr	1		
	2nd Qtr	1		
ĺ	1st Qtr	1		
2007-09	8th Qtr	1		
	7th Qtr	1		
	6th Qtr	1		
	5th Qtr	1	1	0
	4th Qtr	1	1	0
	3rd Qtr	1	1	0
	2nd Qtr	1	1	0
	1st Qtr	1	1	0
2005-07	8th Qtr	1	2	1
	7th Qtr	1	1	0
ĺ	6th Qtr	1	1	0
İ	5th Qtr	1	1	0
	4th Qtr	1	1	0
	3rd Qtr	1	1	0
	2nd Qtr	1	0	(1)
	1st Qtr	1	1	0

9B04

This measures the Public Health Laboratories' proficiency in testing specimens for the presence of biological threats. Maintaining proficiency is an important part of preparing for emergencies. Data Source: Laboratory specimen results Report Frequency: Quarterly. Measure began in 05-07.

Percent of corrective action plan recommendations from previous year's exercises implemented.

Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	100%		
	7th Qtr	75%		
	6th Qtr	50%		
	5th Qtr	25%		
	4th Qtr	80%		
	3rd Qtr	60%		
	2nd Qtr	40%		
	1st Qtr	20%		
2007-09	8th Qtr	100%		
	7th Qtr	75%		
	6th Qtr	50%		
	5th Qtr	25%	20%	(5)%
	4th Qtr	80%	80%	0%
	3rd Qtr	60%	65%	5%
	2nd Qtr	40%	50%	10%
	1st Qtr	20%	25%	5%

9P04

Emergency response exercises are valuable to evaluate and implement corrective action plans from previous year's exercises to current year's plans. Data Source: Corrective Action Plans & After Action Plans. Report Frequency: Quarterly. Measure began in 07-09.

Percent of recommendations identified in the corrective action
plans that are tested in the subsequent emergency response
exercises.

Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	80%	-	
	7th Qtr	60%		
	6th Qtr	40%		
	5th Qtr	20%		
	4th Qtr	60%		
	3rd Qtr	40%		
	2nd Qtr	20%		
2007-09	8th Qtr	80%		
	7th Qtr	60%		
	6th Qtr	40%		
	5th Qtr	20%	0%	(20)%
	4th Qtr	60%	60%	0%
	3rd Qtr	40%	45%	5%
	2nd Qtr	20%	30%	10%
0.10.4	1st Qtr	0%	10%	10%

9N04

Corrective Action Plans are identified after each emergency response exercise. They must be tested for effectiveness and then implemented. Data Source: Corrective Action Plans & After Action Plans. Report Frequency: Quarterly. Measure began in 07-09.

A005 Community Environmental Health

The Department of Health works with public health partners and businesses to protect the community from hazards in the environment by educating the public about how to make and keep their environment safe and healthy; developing environmental public health standards for small and medium-sized septic systems and swimming pools; helping the public prevent disease spread by animals; monitoring sources of radiation, radioactive materials, and radioactive waste; providing resources to clean areas that have been contaminated by dangerous materials; monitoring and preventing pesticide-related illness; and helping communities minimize or eliminate exposure to contaminants in the environment.

	FY 2010	FY 2011	Biennial Total
FTE's	127.3	127.0	127.2
GFS	\$4,073,000	\$4,178,000	\$8,251,000
Other:	\$10,098,000	\$10,094,000	\$20,192,000
Total	\$14,171,000	\$14,272,000	\$28,443,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Mitigate environmental hazards

Expected Results

The places where people live, work and play are healthy and safe from hazards in the environment.

Percent of Puget Sound local health jurisdictions that have developed data to inventory and map on-site sewage systems in marine recovery areas.

Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	100%		
	4th Qtr	75%		
2007-09	8th Qtr	50%		
	4th Qtr	0%	8%	8%

2S05

Marine recovery area is an area that has been identified as needing additional requirements for on-site sewage disposal systems to reduce the impact of nitrogen and other contaminants on marine waters. Data Source: Office of Shellfish and Water Protection. Report Frequency: Annually Q4 and Q8. Measure begain in 05-07. Measure began 07-09.

Percent of Puget Sound sites with a potential human exposure that have been evaluated for health risks.

Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	100%		
	4th Qtr	100%		
2007-09	8th Qtr	100%		
	4th Qtr	35%	16%	(19)%

2T05

This measure looks at hazardous waste sites that impact Puget Sound waters and have a potential human exposure. There are currently 32 sites identified by the Department of Ecology. Six sites have been evaluated for health risks and one additional is in progress. Work will continue on the remaining sites as data becomes available. Data Source: Office of Environmental Health Assessment. Report Frequency: Annual Q4 and Q8. Measure began 07-09.

Percent of	Percent of radiation inspections completed with no critical violations.				
Biennium	Period	Target	Actual	Variance	
2009-11	8th Qtr	95%			
	4th Qtr	95%			
2007-09	8th Qtr	92%			
	4th Qtr	91%	88%	(3)%	
2005-07	8th Qtr	90%	87.6%	(2.4)%	
2005	4th Qtr	90%	90%	0%	

2R05

Critical violations: those items more likely to cause harm or present more significant risk. Data Source: Office of Radiation Protection. Report Frequency: Annual Q4 and Q8. Measure began 05-07.

A007 Shellfish and Food Safety

The Department of Health helps make sure that food served in restaurants and other businesses is safe to eat. The department ensures that shellfish harvested from Washington waters is also safe to eat. Activities include monitoring local waters and beaches where shellfish grow for pollution and harmful toxins; developing public health standards for the safe sale and service of food; educating food service workers and the public on proper food safety; inspecting commercial shellfish companies; and investigating and controlling outbreaks of foodborne illnesses.

	FY 2010	FY 2011	Biennial Total
FTE's	31.0	31.2	31.1
GFS	\$2,437,000	\$2,468,000	\$4,905,000
Other	\$654,000	\$653,000	\$1,307,000
Total	\$3,091,000	\$3,121,000	\$6,212,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Mitigate environmental hazards

Expected Results

Shellfish from Washington waters is safe to eat. Restaurants and other food businesses sell and serve food that is safe to eat.

Number of acres of shellfish beds reopened that are currently closed to commercial and recreational harvest.

ĺ	Biennium	Period	Target	Actual	Variance
ĺ	2009-11	8th Qtr	1,000		
l	2007-09	8th Qtr	1,000		
İ	2005-07	8th Qtr	1,000	3,697	2,697

2F07

This measure demonstrates when marine water quality is improved.

Data Source: Office of Shellfish and Water Protection. Report

Frequency: Q8 End of Biennium. Measure began in 05-07.

Percent of shellfish inspections completed with no critical violations.

Violationor				
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	97%		
	4th Qtr	97%		
2007-09	8th Qtr	96%		
	4th Qtr	96%	95%	(1)%
2005-07	8th Qtr	96%	97%	1%
	7th Qtr	96%	96%	0%
İ	6th Qtr	96%	99%	3%
	5th Qtr	96%	99%	3%
İ	4th Qtr	96%	92%	(4)%
	3rd Qtr	96%	95%	(1)%
	2nd Qtr	96%	100%	4%
	1st Qtr	96%	100%	4%

2D07

Critical violations: those items more likely to cause harm or present more significant risk. Data Source: Office of Shellfish and Water Protection. Report Frequency: Annual Q4 and Q8. Measure began in 05-07.

A008 Strengthening the Public Health Network

Washington's governmental public health system is decentralized, relying heavily on the day-to-day work of 35 local public health jurisdictions (county and multi-county agencies) plus many additional partners including emergency response teams, trauma response units, hospitals, community clinics, and tribal health services. The Department of Health maintains an active partnership and continuous communication with a range of public health decision-makers at all levels - local, state, and federal because coordinated response is essential, whether responding to widespread disease threats, negotiating policy and budget objectives for health improvement, or assuring that information can flow across county lines or to other health partners. works to strengthen its partnerships with public health, particularly agencies at the community level. Activities include providing resources for emergency medical and trauma services; promoting access to health care in rural communities; increasing electronic communications between the department, local health partners, hospitals, and emergency respondents; coordinating response to emerging health issues with federal, state, and local partners; offering certified copies of birth, death, divorce, and marriage records to the public; building and supporting information networks to provide data that helps people make good decisions about public health; and maintaining a strong relationship between state and local public health jurisdictions in order to share information and respond quickly to public health threats.

	FY 2010	FY 2011	Biennial Total
FTE's	39.5	34.8	37.2
GFS	\$9,364,000	\$9,311,000	\$18,675,000
Other:	\$10,144,000	\$9,846,000	\$19,990,000
Total	\$19,508,000	\$19,157,000	\$38,665,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Mitigate environmental hazards

Expected Results

The public depends on a resilient and effective public health network. The public health network is coordinated and responsive to the public's needs.

Increase the percentage of deaths that are reported through the Electronic Death Registration System (EDRS).				
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	24%	<u> </u>	
	7th Qtr	22%		
	6th Qtr	20%		
	5th Qtr	18%		
	4th Qtr	16%		
	3rd Qtr	14%		
	2nd Qtr	12%		
	1st Qtr	10%		
2007-09	8th Qtr	26%		
	7th Qtr	24%		
	6th Qtr	22%		
	5th Qtr	20%	26%	6%
	4th Qtr	18%	10%	(8)%
	3rd Qtr	16%	9%	(7)%
	2nd Qtr	14%	8%	(6)%
1.000	1st Qtr	12%	11%	(1)%

1C08

Reporting deaths quickly through an electronic system saves on time and resources. Prior method was being done by a paper process. Q4 07-09 the electronic death registration system has suffered technical set backs. Targets adjusted. Data Source: Electronic Death Registration System. Report Frequency: Quarterly. Measure began in 07-09.

A010 Family and Child Health and Safety

Working with many state and local partners, the Department of Health promotes healthy behaviors and the use of preventive health services. The agency promotes regular health checkups for everyone and prenatal care and eduction for parents. Some of the agency's most important work is to distribute vaccines for children and investigate and contol vaccine-preventable disease. The agency provides health promotion materials and consultation of the best strategies; provides nutrition and health education for pregnant women; and helps thousands of state residents by providing healthy food through the Women, Infants, and Children (WIC) program. The Department of Health supports family planning/reproductive health services for women, men, and teens; linking children and families to health services; and providing programs to prevent injuries.

	FY 2010	FY 2011	Biennial Total
FTE's	176.3	176.0	176.2
GFS	\$43,757,000	\$15,912,000	\$59,669,000
Other	\$206,804,000	\$188,234,000	\$395,038,000
Total	\$250,561,000	\$204,146,000	\$454,707,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Increase healthy behaviors

Expected Results

Washington has healthy infants, children, youth and well-informed parents. Communities are safe and supportive of children, youth and families.

Proportion of children who receive all recommended vaccines (15 dose series).

Biennium	Period	Target	Actual	Variance
2009-11	5th Qtr	77.8%		
	1st Qtr	75.6%		
2007-09	5th Qtr	73.4%	69%	(4.4)%
	1st Qtr	70.9%	71.2%	0.3%

7G10

Immunization is the single most important method to protect children against serious and sometimes deadly infectious diseases. There are no effective alternatives. Data Source: National Immunization survey conducted annually by CDC. Data reported in September of each year and represents previous year's performance. Reporting Frequency: Q1 and Q5. Measure began in 07-09.

Decrease rate of hospitalizations due to falls for the 65 and older population. (per 100,000)

ĺ	Biennium	Period	Target	Actual	Variance
ı	2009-11	8th Qtr	1,694.7		
		4th Qtr	1,703.3		

6A10

Most falls are caused by an interaction between person and environment-for example, when a person with balance problems encounters a tripping hazard in a poorly lighted room. Over 1/2 of falls occur in/around the home. Research has shown that interventions include older adult prevention/education as well as educ. for family members and health care providers. Data Source: Comprehensive Hospital Abstract Reporting System. Reporting Frequency: Annually Q4 and Q8. Begins in 09-11.

A011 Public Health Laboratory

The Department of Health's Public Health Laboratories serve the people of our state by providing accurate and timely laboratory results. The laboratories' around-the-clock, cutting-edge services are used by local health agencies, Department of Health programs, and the state's health care and emergency response system. The laboratories provide a broad range of tests including those that look for communicable disease, shellfish poisoning, foodborne illnesses, health issues in newborn babies, and contamination of air, water, and food that may endanger human health.

:	FY 2010	FY 2011	Biennial Total
FTE's	89.7	87.5	88.6
GFS	\$5,118,000	\$5,407,000	\$10,525,000
Other	\$8,133,000	\$7,552,000	\$15,685,000
Total	\$13,251,000	\$12,959,000	\$26,210,000

Statewide Result Area: Improve the health of Washingtonians Statewide Strategy: Identify and mitigate health risk factors

Expected Results

Public health departments and health care providers receive accurate and timely, science-based information to use when making decisions about public health.

All newborns are tested in Washington to screen them for genetic disorders that can be treated.				
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	99.8%		
1	7th Qtr	99.8%		
1	6th Qtr	99.8%		
İ	5th Qtr	99.8%		
İ	4th Qtr	99.8%		
	3rd Qtr	99.8%		
	2nd Qtr	99.8%		
	1st Qtr	99.8%		
2007-09	8th Qtr	99.6%		
	7th Qtr	99.6%		
	6th Qtr	99.6%		
	5th Qtr	99.6%	99.78%	0.18%
	4th Qtr	99.6%	99.84%	0.24%
	3rd Qtr	99.6%	99.8%	0.2%
	2nd Qtr	99.6%	99.84%	0.24%
	1st Qtr	99.6%	99.84%	0.24%
2005-07	8th Qtr	99.6%	99.69%	0.09%
	7th Qtr	99.6%	99.91%	0.31%
	6th Qtr	99.6%	99.89%	0.29%
	5th Qtr	99.6%	99.83%	0.23%
	4th Qtr	99.6%	99.81%	0.21%
	3rd Qtr	99.6%	99.88%	0.28%
	2nd Qtr	99.6%	99.83%	0.23%
	1st Qtr	99.6%	99.9%	0.3%

1A11

We test each newborn in Washington in order to screen for genetic disorders that can be treated. Children are given the opportunity to live healthy productive lives because their conditions were detected and treated in time, sparing them permanent disability or death. Data Source: DOH Newborn Screening Database. Reporting Frequency: Quarterly. Measure began in 05-07.

A013 State Board of Health

The State Board of Health is housed within the Department of Health, yet works independently advising the state on health policy and adopting rules that guide many public health functions. It works with input from public health partners, local government, consumers, and the public. Key areas of rule-making include vital records; disease monitoring, reporting, and control; childhood health screenings; school immunizations; and food and drinking water safety.

	FY 2010	FY 2011	Biennial Total
FTE's	9.9	8.9	9.4
GFS	\$694,000	\$691,000	\$1,385,000
Other	\$114,000	\$18,000	\$132,000
Total:	\$808,000	\$709,000	\$1,517,000

Statewide Result Area: Improve the health of Washingtonians

Statewide Strategy: Increase healthy behaviors

Expected Results

Public health rules and state policy recommendations reflect current scientific knowledge, public values and the perspectives of health practitioners, local governments and consumers.

A014 Access to Quality of Health Care Services

All people in Washington State deserve to have access to competent, quality healthcare. The Department's programs work to build and maintain systems so that people in all parts of the state can access healthcare. The Department works to recruit and retain physicians, dentists, and nurses in rural and underserved parts of the state.

	FY 2010	FY 2011	Biennial Total
FTE's	27.7	27.7	27.7
GFS	\$5,783,000	\$5,777,000	\$11,560,000
Other:	\$8,496,000	\$6,290,000	\$14,786,000
Total	\$14,279,000	\$12,067,000	\$26,346,000

Statewide Result Area: Improve the health of Washingtonians
Statewide Strategy: Provide access to appropriate health care

Expected Results

People receive professional, safe and reliable health care from qualified providers and facilities.

A015 Patient and Consumer Safety

Patient and consumer safety are among the Department of Health's top priorities. The department works to ensure that more than 320,000 health care providers comply with health, safety, and professional standards through licensing, investigation, and disciplinary activities. The agency provides information to health care facilities, health care professionals, and consumers that allows them to make informed decisions.

	FY 2010	FY 2011	Biennial Total
FTE's	401.3	406.2	403.8
GFS	\$2,646,000	\$2,111,000	\$4,757,000
Other:	\$45,562,000	\$55,489,000	\$101,051,000
Total:	\$48,208,000	\$57,600,000	\$105,808,000

Statewide Result Area: Improve the health of Washingtonians
Statewide Strategy: Provide access to appropriate health care

Expected Results

Health ca	Health care professional credentials issued within 14 days of complete applications.				
Biennium		Target	Actual	Variance	
2009-11	8th Qtr	95%			
	7th Qtr	94%			
	6th Qtr	93%			
	5th Qtr	92%			
	4th Qtr	91.5%			
	3rd Qtr	91%			
	2nd Qtr	90.5%			
	1st Qtr	90%			
2007-09	8th Qtr	95%			
	7th Qtr	94.75%			
	6th Qtr	94.25%			
	5th Qtr	93.75%	96.1%	2.35%	
	4th Qtr	93.25%	90%	(3.25)%	
	3rd Qtr	92.75%	72.6%	(20.15)%	
	2nd Qtr	92.25%	92.3%	0.05%	
	1st Qtr	91.75%	88%	(3.75)%	
2005-07	8th Qtr	0%	94.4%	94.4%	
	7th Qtr	0%	95.7%	95.7%	
	6th Qtr	0%	86.7%	86.7%	
	5th Qtr	0%	98.1%	98.1%	

6D15

The target is to issue credentials (licenses, certifications, or registration) for individual health care professionals within 14 days after all required documentation is received by the Department. The Department issues over 50,000 health care provider credentials each year. Data Source: Health Systems Quality Assurance, DOH. Reporting Frequency: Quarterly. Measure began in 07-09.

Increase i	Increase in adverse events reported by health care facilities.			
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	62		
	7th Qtr	60		
	6th Qtr	59		
	5th Qtr	57		
	4th Qtr	55		
	3rd Qtr	54		
	2nd Qtr	52		
	1st Qtr	50		

6F15

Health care facilities are required by law to report on 28 different types of adverse events to gain an accurate understanding of the size and root cause of these events. Targets are not cumulative and the intent is to receive a minimum of reports per quarter. Data Source: Community Health Systems, DOH. Reporting Frequency: Quarterly. Measure begins in 09-11.

	Percent of o	•	t investigations in cilities within set t	•	health care
ĺ	Dionnium	Doriod	Target	Actual	Variance

	Biennium	Period	Target	Actual	Variance
Γ	2009-11	8th Qtr	90%	. <u>.</u>	
ĺ		7th Qtr	89%		
İ		6th Qtr	88%		
İ		5th Qtr	87%		
İ		4th Qtr	85%		
İ		3rd Qtr	83%		
İ		2nd Qtr	81%		
ĺ		1st Qtr	79%		

6G15

Each year the Department receives approximately 800 complaints against health care facilities. Each complaint is evaluated to determine appropriate action. Patient safety relies on the Department's ability to investigate and resolve complaints as quickly as possible. Data Source: Health Systems Quality Assurance, DOH. Reporting Frequency: Quarterly. Measure begins in 09-11.

A016 Prevent and Respond to the Transmission of Communicable and Infectious Disease

The Department of Health works with many partners to protect people from communicable and infectious disease, including HIV/AIDS, sexually transmitted diseases, hepatitis, and tuberculosis. The agency educates the public on ways to stay healthy and avoid contracting and spreading disease. It monitors and tracks health trends as well as the rate and frequency of infectious disease. State health programs pay for drugs and limited medical care for HIV clients and work with local health agencies to investigate disease outbreaks. The Department also works to prevent and reduce the effects of communicable disease.

	FY 2010	FY 2011	Biennial Total
FTE's	139.9	143.6	141.8
GFS	\$21,389,000	\$24,526,000	\$45,915,000
Other:	\$40,237,000	\$32,108,000	\$72,345,000
Total	\$61,626,000	\$56,634,000	\$118,260,000

Statewide Result Area: Improve the health of Washingtonians
Statewide Strategy: Identify and mitigate health risk factors

Expected Results

Number of H	IV positive	clients accessing	private health	insurance.
Biennium	Period	Target	Actual	Variance
2009-11	8th Qtr	2,810		
ĺ	7th Qtr	2,790		
ĺ	6th Qtr	2,770		
	5th Qtr	2,750		
ĺ	4th Qtr	2,730		
ĺ	3rd Qtr	2,710		
İ	2nd Qtr	2,690		
ĺ	1st Qtr	2,670		
2007-09	8th Qtr	2,630		
	7th Qtr	2,610		
	6th Qtr	2,590		
	5th Qtr	2,570	2,596	26
	4th Qtr	2,550	2,535	(15)
	3rd Qtr	2,530	2,469	(61)
	2nd Qtr	2,510	2,460	(50)
	1st Qtr	2,437	2,490	53
2005-07	8th Qtr	2,437	2,490	53
ĺ	7th Qtr	2,417	2,432	15
	6th Qtr	2,397	2,417	20
ĺ	5th Qtr	2,377	2,414	37
	4th Qtr	2,357	2,390	33
	3rd Qtr	1,579	2,356	777
	2nd Qtr	1,559	1,543	(16)
	1st Qtr	1,558	1,558	0

7A16

Statewide, annual numbers of new HIV diagnoses have been stable in recent years. Better treatments have led to steady increases in the number of people who are surviving with HIV/AIDS. By adhering to their HIV medication regimen, people living with HIV can suppress the amount of virus in their bodies to undetectable levels. As a result, clients are less infectious and less likely to be able to transmit HIV. Data Source: Early Intervention Program, DOH. Reporting Frequency: Quarterly.

Reduce rate of Chlamydia infections in females ages 15-24.						
Biennium	Period	Target	Actual	Variance		
2009-11	5th Qtr	2,035	· <u>-</u>			
	1st Qtr	2,065				
2007-09	5th Qtr	2,094	2,184	90		
	1st Qtr	2,124	2,153	29		

7C16

Data Source: Data obtained from DOH Sexually Transmitted Disease Management Information System and represents the previous calendar year's incidence rate. Data represent cases per 100,000 that are diagnosed during a calendar year, based on provider-reported, laboratory confirmed cases of chlamydial infection. Data reported annually in July Q1 and Q5.

Grand Total

	FY 2010	FY 2011	Biennial Total
FTE's	1,539.8	1,531.6	1,535.7
GFS	\$108,879,000	\$84,169,000	\$193,048,000
Other	\$416,628,000	\$382,028,000	\$798,656,000
Total	\$525,507,000	\$466,197,000	\$991,704,000